Financial Disclosure by Executive Employees 5 2009

Filing Form Covering Calendar Year 2008 Filing Deadline: Thursday, April 30, 2009, 5 p.m.

(Write "N/A" if a question is not applicable to you. Use additional sheets if needed to fully answer any question.)

Section 1: Name/Address/Phone			
Your name:			
Bru	ce A. Van Note		
Your Agency/Department/Bureau/Division:			
Tra	nsportation/ Executive		
Your Title:			
Dep	outy Commissioner, Operations and Budget		
Your State Agency Mailing Address:			
16S	HS, Child St., Augusta, ME. 04333-0016		
Your State Agency Phone Number:			
624-3002			
Section 2: Statement of sources of income (as required by 5 MRSA §19 sub-§2)			
2. Aside from employment in state government: If during 2008 you were <u>neither</u> separately employed by another person, firm, corporation, association or organization, <u>nor</u> self-employed, <u>nor</u> had any other sources of income over \$1000 from each source, check the following box and skip to question 3.			
	2-A. If, during 2008, you were an employee of another person, firm, corporation, association, or organization as opposed to being self-employed, fill out the following; if not, go to question 2-B:		
	The name of the employing entity:		
•	Its address:		
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	The nature of the business (its principal type of economic activity; for a law firm, the firm's major areas of		
	practice);		

ANTE SE	2-B. If you were self-employed during 2008: (Note: "Self-employed" is defined by 5 MRSA §19 sub-§1 ¶J as an "independent contractor" as defined in 39-A MRSA §102 sub-§13, which says in part: "Independent contractor' means a person who performs services for another under contract, but who is not under the essential control or superintendence of the other person while performing those services." It does not cover interest income and similar non-contracted income, sources for which should be reported under question 2-
	C below.)
	The name of your business:
	Its address.
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ar carrie	The nature of the business (your principal type of economic activity, for an attorney, your major areas of
	practice) he throma was received a second of the contract of the fill had backed because
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-	Name each source of income through self-employment that brings either:
	more than \$1000; or more than 10% of your gross income whichever is greater, excluding gifts. (To clarify this: if no source contributes more than \$1000, you don't have to report. If you enjoy many large sources over \$1000, you have to report only those that contribute more than 10% to your gross. For a definition of income, see 5 MRSA §19 sub-§1 ¶H, attached; of gifts, 5 MRSA §19 sub-§1 ¶E. If this form of disclosure is prohibited by statute, rule, or an established code of ethics for your profession, specify instead the principal type of economic activity from which sources of income under this paragraph derive.)
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	2-C. If you had other sources of income over \$1000 each, excluding gifts, list them here. (For a definition of income, see 5 MRSA §19 sub-§1 ¶H, attached; of gifts, 5 MRSA §19 sub-§1 ¶E.)
	definition of income, see 5 mixon \$15 sub-\$1 [it, attached, of girts, 5 mixon \$15 sub-\$1 [it.)
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Section 3. Gifts

List the specific source of each gift received: (For a definition of gifts, see 5 MRSA §19 sub-§1 ¶E, attached.)

None

Section 4. Family Member Income

List here the type of economic activity engaged in by any member of your immediate family which resulted in \$1,000 or more in 2008. If the income was received by your spouse or domestic partner, list his or her name. If the income received by an immediate family member is derived from employment or compensation, also include the job title.

Sugar F. Van Note, wife, solary from Healthy Maine Partnerships, Administrative Assistant 23,000 t - Gross Treeme

Section 5. Honoraria

List here the sources of any honoraria (not travel or expenses) accepted for appearances or speeches related to your official duties. (For a definition of honorarium, see 5 MRSA §19 sub-§1 ¶F, attached. Note that this involves honoraria in any amount, not just amounts over \$1000.)

Section 6. Compensated work on behalf of executive branch agencies

Aside from your official salary, list here each executive agency before which you or an immediate family member has represented or assisted others in return for compensation of any amount:

None

Section 7. Sales to executive bra	nch agencies
List here each executive branch agency to which you or your immediate family excess of \$1000:	members sold goods or services with a value in
None	

	•
Section 8. Reportable liab	
List here the name(s) of your creditors for any reportable liabilities (unsecured relative. This does not include credit card liabilities, most educational loans, of business loans from most financial institutions. (For a definition of reportable relatives, same, ¶I.)	ampaign contributions otherwise recorded by law, or
None	A tagent and the transfer of t
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Ooth ox Affirmation (Notari	nation)
Oath or Affirmation (Notarian "Do you solemnly swear (affirm) that the contents of this report are known to y	
true (so help you God)?"	
·	
Signature of Executive Employee:	A. Ven Voto
Date: 4/30/09	
Date: 4/30/09	
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Subscribed and sworn (affirmed) to before me this 3 day of 1	, 200 9.
	and the hours of the
Signature of Maine Notary Public	Notes Bulle State of Mains
	Notary Public, State of Maine
	My commission expires (date)
·	CHERYL C. MARTIN-HUNT
·	Notary Public State of Maine
Seal (optional)	ly commission expires December 5, 2010

Return to:

Cyndi Phillips, Commission Assistant Commission on Governmental Ethics and Election Practices 135 State House Station, Augusta, ME 04333-0135

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Seal (optional)